

097831419

PENSCAPE

DEPENDENT CLAIM
CALCULATION SHEET
TO BE USED WITH FORM PD-101

APPLICANT:

No.	Claim	AFTER AMENDMENT		No.	Claim	AFTER AMENDMENT		No.	Claim	AFTER AMENDMENT		No.	Claim	AFTER AMENDMENT	
		IND.	DEP.			IND.	DEP.			IND.	DEP.			IND.	DEP.
1				51				91							
2	1			52				92							
3	2			53				93							
4	3			54				94							
5	4			55				95							
6	5			56				96							
7	6			57				97							
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9	8			59				99							
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43	42			93											
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45	44			95											